| pplication or Docket Number  |  |                                 |              |                       |              |                  |  |                                       |                        |         |                            | ber                    |
|--|--|---------------------------------|--------------|-----------------------|--------------|------------------|--|---------------------------------------|------------------------|---------|----------------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  099 (21) 6   |  |                                 |              |                       |              |                  |  |                                       |                        |         |                            |                        |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |                                 |              |                       |              |                  |  | SMALL ENTITY TYPE                     |                        |         | OTHER THAN OR SMALL ENTITY |                        |
| TOTAL CLAIMS   |  |                                 | 24           |                       |              |                  | 1  | RATE                                  | FEE                    | 1       | RATE                       | FEE                    |
| FOR  |  |                                 | NUMBER FILED |                       | NUMBER EXTRA |                  |  | BASIC FEE                             | 355.00                 | OR      | BAȘIC FEE                  | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |                                 | ტ            |                       | · []         |                  |  | X\$ 9=                                |                        | OR      | X\$18=                     | 4                      |
| INDEPENDENT CLAIMS   |  |                                 | 5 minus 3 =  |                       | 3            |                  |  | X40=                                  |                        | OR      | X80=                       | 2                      |
| MULTIPLE DEPENDENT CLAIM P   |  |                                 | RESENT       |                       |              |                  |  | +135=                                 |                        | OR      | +270=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |                                 |              |                       |              |                  | TOTAL  |                                       | OR                     | TOTAL   | 74200                      |                        |
| ,  | CLAIMS AS AMENDED - PART II                |                                 |              |                       |              |                  |  |                                       |                        |         | OTHER                      |                        |
|  |  |                                 |              | (Colur                |              |                  | 1 r  | SMALL                                 |                        | OR<br>I | SMALL                      |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT | c            | NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |  | RATE                                  | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total                                      | •                               | Minus        | **                    |              | =                |  | X\$ 9=                                |                        | OR      | X\$18=                     |                        |
|  | Independent                                | *                               | Minus        | ***                   | \$-          | =                |  | X40=                                  |                        | OR      | X80=                       |                        |
|  | FIRST PRESE                                | NTATION OF MI                   | ULTIPLE DEF  | PENDENT               | CLAIM        |                  | 1  | +135=                                 |                        |         | +270=                      |                        |
|  |  |                                 | •            |                       |              |                  | Ļ  | TOTAL                                 |                        | OR      | TOTAL                      |                        |
|  | (Column 1) (Column 2) (Column 3)           |                                 |              |                       |              |                  |  | ADDIT. FEE                            |                        | OR      | ADDIT. FEE                 |                        |
| AMENDMENT B  |  | CLAIMS                          |              | HIGHE                 |              |                  | 1 r  |                                       | ADDI-                  | 1 1     |                            | ADDI-                  |
|  |  | REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVIO<br>PAID | OUSLY        | PRESENT<br>EXTRA |  | RATE                                  | TIONAL                 |         | RATE                       | TIONAL                 |
|  | Total                                      | *                               | Minus        | **                    |              | =                |  | X\$ 9=                                |                        | OR      | X\$18=                     |                        |
|  | Independent                                | *                               | Minus        | ***                   |              | =                |  | X40=                                  |                        | OR      | X80=                       | -                      |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT   |                                 |              | CLAIM                 |              | J                | +135=  |                                       |                        | +270=   |                            |                        |
|  |  |                                 | •            |                       |              |                  | L  | TOTAL                                 |                        | OR      | TOTAL                      |                        |
|  |  |                                 |              |                       |              |                  |  | ADDIT. FEE                            |                        | OR      | ADDIT. FEE                 |                        |
|  |  | (Column 1)<br>CLAIMS            |              | (Colur                |              | (Column 3)       | 1 r  | · · · · · · · · · · · · · · · · · · · |                        | 1 1     |                            |                        |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |  | RATE                                  | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total                                      | •                               | Minus        | **                    | •            | =                |  | X\$ 9=                                |                        | OR      | X\$18=                     | į.                     |
|  | Independent                                | *                               | Minus        | ***                   |              | =                | <b>                                     </b> | X40=                                  |                        | OR      | X80=                       |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT C |                                 |              |                       | CLAIM        |                  | <b>⋏</b>                                     | +135=                                 |                        |         |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |                                 |              |                       |              |                  |  |                                       |                        | OR      | +270=                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |                                 |              |                       |              |                  |  |                                       |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |
|  |  | nber Previously Pa              |              |                       |              |                  | er fou                                       | ind in the app                        | propriat box           | k in co | lumn 1.                    |                        |